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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 746366

1. Corporation Name

COUNTRY CLUB VILLAS TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

20442 NW 15TH AVE
 MIAMI FL 33169

Mailing Address

20442 NW 15TH AVE
 MIAMI FL 33169



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

03/21/1979

4. FEI Number

59-1989254

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

ARLEEN DIAZ
 20448 N.W. 15TH AVE
 MIAMI, FLORIDA
 MIAMI FL 33169

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/13/99

12. OFFICERS AND DIRECTORS

T DELETE

NAME: SHELIA FIOCCO
 STREET ADDRESS: 20442 N.W. 15TH AVE
 CITY-ST-ZIP: MIAMI FL

S DELETE

NAME: BOSSTICK, BERNIE
 STREET ADDRESS: 20444 N.W. 15TH AVE
 CITY-ST-ZIP: MIAMI FL 33169

P DELETE

NAME: ARLEEN DIAZ
 STREET ADDRESS: 20448 N.W. 15TH AVE
 CITY-ST-ZIP: MIAMI FL

D DELETE

NAME: TONY OKONMAH
 STREET ADDRESS: 20613 N.W. 15TH AVE
 CITY-ST-ZIP: MIAMI FL

D DELETE

NAME: WHITE, ADRIS
 STREET ADDRESS: 20609 NW 15TH AVE
 CITY-ST-ZIP: MIAMI FL 33169

D DELETE

NAME: CLARKE, PENNY
 STREET ADDRESS: 20507 NW 15TH AVE
 CITY-ST-ZIP: MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME: VP JESSE LEGGETT
 1.3 STREET ADDRESS: 20605 N.W. 15th AVE
 1.4 CITY-ST-ZIP: MIAMI, FLORIDA 33169

2.1 TITLE Change Addition

2.2 NAME: RITA KINLOCK
 2.3 STREET ADDRESS: 20615 N.W. 15th AVE
 2.4 CITY-ST-ZIP: MIAMI, FLORIDA 33169

3.1 TITLE Change Addition

3.2 NAME: HELEN DIXON
 3.3 STREET ADDRESS: 20503 N.W. 15th AVE
 3.4 CITY-ST-ZIP: MIAMI, FLORIDA 33169

4.1 TITLE Change Addition

4.2 NAME:
 4.3 STREET ADDRESS:
 4.4 CITY-ST-ZIP:

5.1 TITLE Change Addition

5.2 NAME:
 5.3 STREET ADDRESS:
 5.4 CITY-ST-ZIP:

6.1 TITLE Change Addition

6.2 NAME:
 6.3 STREET ADDRESS:
 6.4 CITY-ST-ZIP:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/13/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)